jroup on Population constituted in commission under the Chairmanship of Registrar General of India has estimated the country's population to cross 100 crores by 2000 A.D. This Committee has projected the population in 2016 A.D. at 126.4 crores.

(b) and (c) The programmes of Department of Family Welfare are aimed at controlling the population of the country at a level consistent with the requirement of national development. The use of contraceptives and terminal methods is being canvassed with the citizens in the reproductive age group for avoiding unwanted pregnancies and facilities for reproductive and child health through the State Health Systems are being provided for improving the reproductive and child health status •of mothers/children which would keep the families small in the long run.

The Reproductive and Child Health Services are proposed to be substantially improved and strengthened during the 9th Plan and availability of contraceptives will be improved by strengthening arrangements for social marketing of contraceptives. Panchayat Raj institutions are proposed to be closely associated and particular attention for purpose of train-ing and IEC is proposed to be given to weak districts.

PIICs without Doctors in Karnataka

229. SHRI JANARDHANA POOJARY: Will the PRIME MINISTER be pleased to state:

(a) whether there are any Primary Health Centre (PHCs) in Karnataka which did not. have doctors and other para medical staff as on 30th June, 1997;

(b) if so, the reasons therefor; and

(c) the steps taken to provide such staff?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) As per the information available till December, 1996, but of total of 1459 Primary Health J Centres functioning in Karnatka, 227 ! Primary Health Centres were functioning \ without doctors, 622 without Lab. Technicians and 406 without pharmacists.

(b) and (c) Inadequacy of medical and para-medical staff is the main reason for these vacancies. The State Government has taken the following steps to fulfil these vacancies:—

1. Making Rural Service compulsory for doctors for certain periods.
2. Appointment of contract doctors.
3. Special drive has been launched to recruit para-medical staff against existing vacancies.

Regional Cancer Centres in Gujarat

230. SHRI AHMED PATEL: Will the PRIME MINISTER be pleased to state:

(a) the numocr of Regional Cancer Centres (RCCs) presently functioning in Gujarat, giving details of each centre;

(b) the number of cancer patients handled by each centre during the last three years, centre-wise and year-wise;

(c) whether Government propose to increase the number of Regional Cancer Centres in the State; and

(d) if so, the details thereof and if not the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) At present only one Regional Cancer Centre is functioning in Gujarat *i.e.* Gujarat Cancer and Research Institute (GCIR) rccongnised by Ministry of Health and Family Welfare.

(b) Cases handled by Gujarat Cancer and Research Institute:—

Year	Total Cancer Cases
1994	7654
1995	7891
1996	8123

(c) No, Sir.

(d) These RCCs were set up on the recommendation of the Cancer Assessment Committee. The rationale adopted in the identification of RCC was to augment those centres which had proven capability/expertise/experience in cancer control activities. As such location of these centre may not strictly confirm to geographical regions of the country. These centres have been involved in training process programmes of medical colleges in the region. Hence, there is no need to increase such centres.

Expenditure on Family Welfare Programmes

231. SHRI MOHINDAR SINGH KALYAN: Will the PRIME MINISTER be pleased to state the details of the amount spent by the Ministry of Health and Family Welfare on the family welfare programmes during the period from 1st April, 1991 to 31st July, 1997; State-wise and year-wise?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): An amount of Rs. 844766.96 lakhs has been spent on Family Welfare Programme during 1st April, 1991 to 31st July, 1997, as under:

(in lakhs)

1991-92	85792.26
1992-93	103854.46
1993-94	140663.39
1994-95	154615.00
1995-96	152932.85
1996-97	158245.00
1997-98 (upto July,'97)	48664.00
Total	844766.96

Out of the above amount, the funds released State-wise and year-wise are indicated in the Annexure.

[See.Appendix 181, Annexure No. 7]

आयुर्वेदिक दवाइंया बनाने वाली इकाइंया

232.**श्री राम जेठमलानी :** क्या प्रधान मंत्री यह बताने की कृपा करेंगे कि**:**

(क) क्या सरकार ने देश में शोधकार्य, विकास तथा उत्पादन कार्य में संलग्र आयुर्वेदिक दवाइंया बनाने वाली इकाइयों की संख्या वाली इकाइंयों की संख्या का पता लगाया हैं**;**

(ख) यदि हां, तो मार्च, 1997 में इन इकाइयों की कुल संख्या कितनी थी**;**

(ग) क्या यह भी सच है कि इन इकाइयों को कव्चा माल उपलबध न होने के कारण इन्होंने सरकार से पट्टे पर जमीन देने की मांग की हैं ताकि वे इन जड़ी बूटियों का उत्पादन कर सकें**;** और

(घ) यदि हां, तो सरकार द्वारा इस संबंध में अब तक कार्यवाही की गई है?

स्वास्थय और परिवार कल्याण मंत्रालय में राज्य मंत्री (श्रीमती रेणुका चौधरी) : (क) और (ख) जी नहीं।

(ग)और (ध) भारतीय चिकित्सा पद्धति एवं होमेयोपैथी विभाग के पास ऐसी कोई योजना नहीं है जिसके अन्तर्गत औषधीय पादपों के उत्पादन के लिए पट्टे पर भूमि दी जा सकती हों। लेकिन विभाग में औषधीय पादपों/जड़ी बूटियों के विकास की एक ऐसी योजना हैं जिसके अन्तर्गत पादपों/जड़ी बूटियों के विकास के लिए सरकारी/अर्धसरकारी तथा कृषि विश्वविद्यालयों को वित्तीय सहायता प्रदान की जाती है जो खतरे अथवा विलुप्त होने की स्थिति में हों।

Increase in the number of Thalassemia Patients

233. SHRI SANJAY DALMIA:
SHRI NARENDRA MOHAN:

Will the PRIME MINISTER be pleased to state:

(a) whether the number cf Thalassemia patients in the country is rising constantly especially the children;

(b) if so, the steps being taken by Government to control the disease;